



STATEMENT OF ECONOMIC INTERESTS

RECEIVED
FAIR POLITICAL PRACTICES COMMISSION
COVER PAGE

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Date Received
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CITY OF LARKSPUR

Please type or print in ink.

NAME OF FILER (LAST) 2013 APR -2 (FIRST) 3: 02 (MIDDLE)
Rifkind Leonard Arlan

1. Office, Agency, or Court

Agency Name

Larkspur City Council

Division, Board, Department, District, if applicable

Your Position

► If filing for multiple positions, list below or on an attachment.

Agency: _____ Position: _____

2. Jurisdiction of Office (Check at least one box)

☐ State

☐ Judge or Court Commissioner (Statewide Jurisdiction)

☐ Multi-County _____

☐ County of _____

☒ City of Larkspur

☐ Other _____

3. Type of Statement (Check at least one box)

☒ Annual: The period covered is January 1, 2012, through December 31, 2012.

☐ Leaving Office: Date Left ____/____/____
(Check one)

-or-

The period covered is ____/____/____, through December 31, 2012.

☐ The period covered is January 1, 2012, through the date of leaving office.

☐ Assuming Office: Date assumed ____/____/____

☐ The period covered is ____/____/____, through the date of leaving office.

☐ Candidate: Election year _____ and office sought, if different than Part 1: _____

4. Schedule Summary

Check applicable schedules or "None."

► Total number of pages including this cover page: 3

☒ Schedule A-1 - Investments - schedule attached

☒ Schedule C - Income, Loans, & Business Positions - schedule attached

☒ Schedule A-2 - Investments - schedule attached

☐ Schedule D - Income - Gifts - schedule attached

☐ Schedule B - Real Property - schedule attached

☐ Schedule E - Income - Gifts - Travel Payments - schedule attached

-or-

☐ None - No reportable interests on any schedule

5. Verification

I certify under penalty of perjury under the laws of the State

Date Signed 03/08/2013
(month, day, year)

CALIFORNIA FORM 700
Fair Political Practices Commission
A Public Document

ATTACHMENT TO COVER PAGE

1. Office, Agency or Court

Agency: Successor Agency to the Redevelopment Agency of the City of Larkspur

CALIFORNIA FORM 700

FAIR POLITICAL PRACTICES COMMISSION

Name _____

▶ NAME OF BUSINESS ENTITY Petroleo Bras Saads	▶ NAME OF BUSINESS ENTITY Qualcomm Inc
GENERAL DESCRIPTION OF BUSINESS ACTIVITY 	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
FAIR MARKET VALUE: <input checked="" type="checkbox"/> \$2,000 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input type="checkbox"/> Over \$1,000,000	FAIR MARKET VALUE: <input type="checkbox"/> \$2,000 - \$10,000 <input checked="" type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input type="checkbox"/> Over \$1,000,000
NATURE OF INVESTMENT: <input checked="" type="checkbox"/> Stock <input type="checkbox"/> Other _____ (Describe) <input type="checkbox"/> Partnership <input type="radio"/> Income Received of \$0 - \$499 <input type="radio"/> Income Received of \$500 or More (Report on Schedule C)	NATURE OF INVESTMENT: <input checked="" type="checkbox"/> Stock <input type="checkbox"/> Other _____ (Describe) <input type="checkbox"/> Partnership <input type="radio"/> Income Received of \$0 - \$499 <input type="radio"/> Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE: ____ / ____ / <u>12</u> ____ / ____ / <u>12</u> ACQUIRED DISPOSED	IF APPLICABLE, LIST DATE: ____ / ____ / <u>12</u> ____ / ____ / <u>12</u> ACQUIRED DISPOSED
▶ NAME OF BUSINESS ENTITY	▶ NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF BUSINESS ACTIVITY 	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
FAIR MARKET VALUE: <input type="checkbox"/> \$2,000 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input type="checkbox"/> Over \$1,000,000	FAIR MARKET VALUE: <input type="checkbox"/> \$2,000 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input type="checkbox"/> Over \$1,000,000
NATURE OF INVESTMENT: <input type="checkbox"/> Stock <input type="checkbox"/> Other _____ (Describe) <input type="checkbox"/> Partnership <input type="radio"/> Income Received of \$0 - \$499 <input type="radio"/> Income Received of \$500 or More (Report on Schedule C)	NATURE OF INVESTMENT: <input type="checkbox"/> Stock <input type="checkbox"/> Other _____ (Describe) <input type="checkbox"/> Partnership <input type="radio"/> Income Received of \$0 - \$499 <input type="radio"/> Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE: ____ / ____ / <u>12</u> ____ / ____ / <u>12</u> ACQUIRED DISPOSED	IF APPLICABLE, LIST DATE: ____ / ____ / <u>12</u> ____ / ____ / <u>12</u> ACQUIRED DISPOSED
▶ NAME OF BUSINESS ENTITY	▶ NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF BUSINESS ACTIVITY 	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
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NATURE OF INVESTMENT: <input type="checkbox"/> Stock <input type="checkbox"/> Other _____ (Describe) <input type="checkbox"/> Partnership <input type="radio"/> Income Received of \$0 - \$499 <input type="radio"/> Income Received of \$500 or More (Report on Schedule C)	NATURE OF INVESTMENT: <input type="checkbox"/> Stock <input type="checkbox"/> Other _____ (Describe) <input type="checkbox"/> Partnership <input type="radio"/> Income Received of \$0 - \$499 <input type="radio"/> Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE: ____ / ____ / <u>12</u> ____ / ____ / <u>12</u> ACQUIRED DISPOSED	IF APPLICABLE, LIST DATE: ____ / ____ / <u>12</u> ____ / ____ / <u>12</u> ACQUIRED DISPOSED

FPPC Form 700 (2012/2013) Sch. A-1
FPPC Advice Email: advice@fppc.ca.gov
FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov

SCHEDULE A-2
Investments, Income, and Assets
of Business Entities/Trusts
(Ownership Interest is 10% or Greater)

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name _____

1. BUSINESS ENTITY OR TRUST

Rifkind Law Group

Name

100 Drake's Landing Rd., Ste. 260, Greenbrae, 94904

Address (Business Address Acceptable)

Check one

☐ Trust, go to 2

☐ Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE

☐ \$0 - \$1,999

☐ \$2,000 - \$10,000

☐ \$10,001 - \$100,000

☒ \$100,001 - \$1,000,000

☐ Over \$1,000,000

IF APPLICABLE, LIST DATE:

____/____/12

ACQUIRED

____/____/12

DISPOSED

NATURE OF INVESTMENT

☐ Partnership

☒ Sole Proprietorship

☐

Other

YOUR BUSINESS POSITION _____

2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)

☐ \$0 - \$499

☐ \$500 - \$1,000

☐ \$1,001 - \$10,000

☐ \$10,001 - \$100,000

☐ OVER \$100,000

3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary)

☐ None

4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST

Check one box:

☐ INVESTMENT

☐ REAL PROPERTY

Name of Business Entity, if Investment, or

Assessor's Parcel Number or Street Address of Real Property

Description of Business Activity or

City or Other Precise Location of Real Property

FAIR MARKET VALUE

☐ \$2,000 - \$10,000

☐ \$10,001 - \$100,000

☐ \$100,001 - \$1,000,000

☐ Over \$1,000,000

IF APPLICABLE, LIST DATE:

____/____/12

ACQUIRED

____/____/12

DISPOSED

NATURE OF INTEREST

☐ Property Ownership/Deed of Trust

☐ Stock

☐ Partnership

☐ Leasehold

Yrs. remaining

☐ Other

☐ Check box if additional schedules reporting investments or real property are attached

1. BUSINESS ENTITY OR TRUST

Name

Address (Business Address Acceptable)

Check one

☐ Trust, go to 2

☐ Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE

☐ \$0 - \$1,999

☐ \$2,000 - \$10,000

☐ \$10,001 - \$100,000

☐ \$100,001 - \$1,000,000

☐ Over \$1,000,000

IF APPLICABLE, LIST DATE:

____/____/12

ACQUIRED

____/____/12

DISPOSED

NATURE OF INVESTMENT

☐ Partnership

☐ Sole Proprietorship

☐

Other

YOUR BUSINESS POSITION _____

2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)

☐ \$0 - \$499

☐ \$500 - \$1,000

☐ \$1,001 - \$10,000

☐ \$10,001 - \$100,000

☐ OVER \$100,000

3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary)

☐ None

4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST

Check one box:

☐ INVESTMENT

☐ REAL PROPERTY

Name of Business Entity, if Investment, or

Assessor's Parcel Number or Street Address of Real Property

Description of Business Activity or

City or Other Precise Location of Real Property

FAIR MARKET VALUE

☐ \$2,000 - \$10,000

☐ \$10,001 - \$100,000

☐ \$100,001 - \$1,000,000

☐ Over \$1,000,000

IF APPLICABLE, LIST DATE:

____/____/12

ACQUIRED

____/____/12

DISPOSED

NATURE OF INTEREST

☐ Property Ownership/Deed of Trust

☐ Stock

☐ Partnership

☐ Leasehold

Yrs. remaining

☐ Other

☐ Check box if additional schedules reporting investments or real property are attached

Comments: _____

SCHEDULE C
Income, Loans, & Business
Positions
(Other than Gifts and Travel Payments)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION Name _____

▶ 1. INCOME RECEIVED	▶ 1. INCOME RECEIVED
NAME OF SOURCE OF INCOME <u>Rifkind Law Group</u>	NAME OF SOURCE OF INCOME _____
ADDRESS (Business Address Acceptable) <u>100 Drake's Landing Rd., Ste. 260, Greenbrae, CA</u>	ADDRESS (Business Address Acceptable) _____
BUSINESS ACTIVITY, IF ANY, OF SOURCE <u>94904</u> <u>Legal Services</u>	BUSINESS ACTIVITY, IF ANY, OF SOURCE _____
YOUR BUSINESS POSITION <u>Owner/Principal</u>	YOUR BUSINESS POSITION _____
GROSS INCOME RECEIVED <input type="checkbox"/> \$500 - \$1,000 <input type="checkbox"/> \$1,001 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input checked="" type="checkbox"/> OVER \$100,000	GROSS INCOME RECEIVED <input type="checkbox"/> \$500 - \$1,000 <input type="checkbox"/> \$1,001 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> OVER \$100,000
CONSIDERATION FOR WHICH INCOME WAS RECEIVED <input checked="" type="checkbox"/> Salary <input type="checkbox"/> Spouse's or registered domestic partner's income <input type="checkbox"/> Loan repayment <input type="checkbox"/> Partnership <input type="checkbox"/> Sale of _____ <small>(Real property, car, boat, etc.)</small> <input type="checkbox"/> Commission or <input type="checkbox"/> Rental Income, list each source of \$10,000 or more _____ <input type="checkbox"/> Other _____ <small>(Describe)</small>	CONSIDERATION FOR WHICH INCOME WAS RECEIVED <input type="checkbox"/> Salary <input type="checkbox"/> Spouse's or registered domestic partner's income <input type="checkbox"/> Loan repayment <input type="checkbox"/> Partnership <input type="checkbox"/> Sale of _____ <small>(Real property, car, boat, etc.)</small> <input type="checkbox"/> Commission or <input type="checkbox"/> Rental Income, list each source of \$10,000 or more _____ <input type="checkbox"/> Other _____ <small>(Describe)</small>

▶ 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD

* You are not required to report loans from commercial lending institutions, or any indebtedness created as part of a retail installment or credit card transaction, made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER _____ ADDRESS (Business Address Acceptable) _____ BUSINESS ACTIVITY, IF ANY, OF LENDER _____ HIGHEST BALANCE DURING REPORTING PERIOD <input type="checkbox"/> \$500 - \$1,000 <input type="checkbox"/> \$1,001 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> OVER \$100,000	INTEREST RATE TERM (Months/Years) _____% <input type="checkbox"/> None SECURITY FOR LOAN <input type="checkbox"/> None <input type="checkbox"/> Personal residence <input type="checkbox"/> Real Property _____ <small>Street address</small> _____ <small>City</small> <input type="checkbox"/> Guarantor _____ <input type="checkbox"/> Other _____ <small>(Describe)</small>
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Comments: _____